Tempe Parks and Recreation

3500 South Rural Road, Tempe, AZ 85282





LadyHawks/Aztec Softball Camp **SUMMER 2004**



SESSION #1: June 1-4 and/or SESSION #2: June 7-11

Jeep Ray, Head Coach of the 2003 5A Girls State Softball Championship and 2003 5A Coach of the year, invites girl softball players to the LadyHawk/Aztec softball camp for the hottest softball camp around. Camp is for grades 6-10 (grade going into Fall '04)

SIGN UP FOR ONE OR BOTH SESSIONS!!!

TO REGISTER:

Mail or bring in registration form to:

Parks and Recreation Office, 2nd floor of the Library

3500 South Rural Road, Tempe, AZ 85282, Monday-Friday 8 AM-5 PM.

Fax to: 480-350-5278 (w/ credit card or debit card only) Registration Available Online at www.tempe.gov/pkrec

Dates: SESSION #1:

Tuesday-Friday (June 1-June 4)

8:00-10:00am SESSION #2:

Monday-Friday (June 7- June 11)

8:00-10:00am

Place: Corona Del Sol High School

(on Rural Rd between Warner & Ray)

Cost: SESSION #1: \$45.00 SESSION #2: \$50.00

OUESTIONS: Please call Bobbi Jones 480-350-5267

2004 Lady	Hawl	ks/Aztec S	OFTBAL	L CAMP	
Name		Phone (hm)		(Parents wk) _	** PARES P
Address		City _			Zip
School	Grade	Age	Birthdate		Sex
E-Mail Address REGISTRATION CODE (Circle) : ***Fee Assistance Availab	:		(\$	AWK2C 50.00) ession 2)	

Waiver of Liability: With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating. I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants. I understand that all reasonable efforts will be extended to insure my health and safety. If the Class/Activity includes any physical exertion, I agree to perform the exercise at my own ability level. I fully understand the nature of this Class/Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for any and all rights and claims for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Class/Activity. I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Class/Activity. I have read and clearly understand the above statements. I realize this is a contract between the City of Tempe and myself and is a release of Liability. I sign it of my own free will. I will require the following accommodation to participate:

Credit Card type:Number	EXP. DATE:
Signature of Parent or Guardian	Date